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FOR UTILITY O		First Named 1									
PATENT APPL	COMPLETE IF KNOWN										
(37 CFR 1.	63)	Application Nu	ımber								
Declaration Submitted	Declaration Submitted after Initial	Filing Date									
with Initial OR Filing	Filing (surcharge (37 CFR 1.16 (e))	Group Art Uni	t								
	required)	Examiner Nam	ne		J						
		•	·								
As a below named inventor	, I hereby declare that	t:									
My residence, mailing address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
METHODS FOR DETECTING SUBSTANCES WHICH BIND TO THE AMYLOID PRECURSOR PROTEIN OR BETA AMYLOID FRAGMENTS, AND BINDING COMPOUNDS											
(Title of the Invention)											
bears the Attorney Docket Number and Title of the Invention noted above											
OR is attached hereto											
OR											
was filed on (MM/DD/YYYY) as United States Application Number or PCT International											
Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as											
amended by any amendment specifically referred to above.											
I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.											
			-		***************************************						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s),											
or of any PCT international a	pplication having a filit	ng date before th	at of the application	ation on which priority is claimed.	or s certificate(s),						
Prior Foreign Application Number(s)	Country	For	eign Filing Date		Priority Claimed? YES NO						
			·								
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
I hereby claim the benefit under	35 U.S.C. 119(e) of any	United States prov	isional application	n(s) listed below.							
Application Num		ng Date D/YYYY)	Attorney Docket Number								
60/558,855	4/02/2004		21538PV	21538PV							
60/588,185	0	7/15/2004	2004 21538PV2								

Attorney Docket Number

DECLARATION AND

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

designating the designating the designation of the	he Unite ed in the 2, I ackr which	nefit under 35 U.S.C. ed States of America, e prior United States nowledge the duty to became available bet on.	listed or PC' disclo	below T interiose info	and, insonational	ofar a applic know	s the s cation in to n	subject in the ne to b	t matter of manner oe materia	of each of provided al to pater	the cl by the ntabilit	aims of first pa ty as def	this applica aragraph of fined in	tion	
U.S. Parent Application or PCT Parent Application Number						Parent Filing Date (MM/DD/YYYY)						atent Number			
- Company Company															
		-													
		PCT international app													
As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith: Practitioners Associated with the Customer Number 000210 OR Registered practitioner(s) named below															
	Nam	· · · · · · · · · · · · · · · · · · ·		Registr	ration				Na	me			Registration Number		
John C. Todaro			36,03	Number 36			1elvin	Wino	kur				32,763		
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.															
Name of Sole or First Inventor: A petition has been filed for this unsigned inventor															
Given Name (first and middle [if any])						$\overline{\mathbf{I}}$	Family Name or Surname								
Craig A. Inventor's		~ <i> }</i>				C	Coburt	n ———	Т		Γ	2		100	
Signature Adog TV								Date	Date 7 M		arch 2005				
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City West Point St						tate	PA	ZIP	19486	_	Cou	ntry U.S.A	٨.		
X Additiona	l inventor	rs are being named on	the1	supp	lemental A	Additio	onal In	ventor	s(s) sheet((s) PTO/SB	1/02A a	attached	hereto.		

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor											
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Amy S.					Espeseth										
Inventor's Signature				pesefle						Date		3/7/2005			
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Give	h Ŋà	me (fitst and middle [if	any])	any]) Family Name or Surname											
Daria J.	X.	aufes		Hazuda											
Inventor's Signature							Date					3/1/05			
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Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor												
Give	n Na	ame (first and middle [if	any]) Family Name or Surname												
Inventor's Signature	The state of the s					1	Date								
Residence: City			State	;			Country		Citizenship		-				
Mailing Address															
City						Stat	te		ZIP			Countr	у		
Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor									entor		
Given Name (first and middle [if								Family Name or Surname							
Inventor's Signature										Date					
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